



# Community Plan 2003



# First 5 Napa County

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# First 5 Napa County Commission Members (4/1/2003)

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Vice Chair

#### Introduction

#### **Our History**

When passed by the voters of California, Proposition 10, the California Children and Families Act of 1998 required an additional 50-cent per excise tax imposed on tobacco products. Under the act, funds from this tax are to be used for promoting, supporting and improving the early development of children from prenatal stage to five years of age. The Act is administered by First Five California (the California Children and Families Commission) and by county Commissions that are appointed by local Boards of Supervisors.

On April 27<sup>th</sup>, 1999, the Napa Board of Supervisors appointed members to the newly established Napa County Children and Families Commission. By law, Commission appointments were to include: one member from the Napa County Board of Supervisors, two members from persons responsible for the management of Napa County Health and Human Services and six Community members with interest and expertise in areas early child development and education. At that time, the Board also: (1) adopted an ordinance establishing the Commission as an independent agency; and (2) created a trust fund to receive the approximate \$1.5 million in annual revenues.

The Commission was convened with the interim assistance of both the Napa County Administrator's and County Counsel's Offices. Subsequently, the Commission hired an Executive Director, Project Assistant and approved consultant contracts for support services. The Commission opened an office and meeting space for Commission meetings. This meeting space is also available for Napa County agencies and organizations.

In early 2000, the Commission developed a strategic plan on how revenues would be invested in Napa County (as required by law). The Commission has used several

approaches to collect information about the issues and concerns of Napa County families that have included Future Search (an innovative planning conference), a community survey, public hearings, and a community advisory committee.

The Community Plan of the Napa County Children and Families Commission was adopted in April of 2000. The first funding cycle began that summer. In September of 2000, the Commission awarded is first grants totaling \$850,000.

At that same time, the Commission began a major initiative by approving three year funding for the CARES (Compensation and Retention Ensure Stability). The CARES project is stipend and professional development project through the Napa County Office of Education that addresses the issue of recruitment and retention of early care and education providers in the community. The Commission has invested \$1.3 million in the CARES project and received over \$700,000 from First 5 California in matching funds.

Since 2000, the Commission has completed two updates of the Community Plan and two additional funding cycles totaling over \$3 million. In 2003, the Commission's Community Plan Subcommittee reformatted the plan in order to streamline its content and make it more *user friendly*. At present, the Commission is: preparing for its fourth funding cycle; considering a focused funding initiative for 2004; and initiating participation in the statewide evaluation of Prop 10 funded services and supports.

### **Our County**

Napa County is approximately one-hour from the major Northern California cities of San Francisco, Oakland and Sacramento. It is considered a rural county and a part of the Greater Bay and North Bay areas. About 60% of all county residents live in the city of Napa. The remaining 40% live in smaller cities in rural surroundings. Highway 29 is the main thoroughfare for the county.

An estimated 124,279 residents live in Napa County (Census 2000), including nearly 7,563 children under the age of 5 (or about 6% of all county residents). The county is growing at a rate of about 6.7% per year as compared with the statewide average of 9.3% per year. American Canyon and St. Helena are the fastest growing communities of the county while the population of Yountville has actually decreased. Asian/Pacific Islanders, African Americans, American Indians and Latinos make up 24.5% of the county's population (up from 19.2% in 1990). It is estimated that Latinos now comprise 19% of the population of the county (up from 14.4% in 1990).

Census 2000 data indicates the following race/ethnicity of children 0-5 in Napa County as:

Race/Ethnicity	Number	% of Total
White	3,719	49.2%
Hispanic	3,268	43.2%
Multiple Races	241	3.2%
Asian	181	2.3%
African American	96	1.5%
Native American and Alaska Native	29	.3%
Other	20	.2%
Native Hawaiian or Other Pacific Islander	9	.1%
Total	7,563	100%

I am very happy because I have seen the importance in reading. She has awakened to reading even if she doesn't know how to read. She will memorize the story, how her teacher reads it, how to handle the book, and she has learned how important it is to read. Thank you for your help and may god bless you all.

Parent of a Child in the Raising a Reader Early Literacy Project (Recipient of First 5 Funding)

#### **Commission Activities**

The highlights of recent Commission activities include:

- In its second year of funding, the Commission awarded 23 grants and 21 mini grants projects totaling \$1,248,056. By the end of its third funding cycle, the Commission will have invested about \$4,500,000 (including the CARES initiative described below) in community-based services and supports for children 0-5 and their families in Napa County.
- Napa CARES (Compensation and Retention Encourage Stability) was funded again for \$425,000 with a state match of \$212,700. The project's goals are to retain early childhood education professionals and to increase the quality of their educational preparation. Napa CARES brings together the Napa County Office of Education, Community Resources for Children, Napa Valley College, and Pacific Union College. In 2001, the program awarded 242 stipends, developed a corps of early childhood educators and care providers, and offered several professional development trainings.
- The Commission developed a successful school readiness application and received matching funds from the State Commission to develop the Napa Early Learning Initiative. The goals of the initiative are to: (1) facilitate the development of services and supports that increase the early learning success of children 0-5; and (2) create a countywide collaborative to coordinate and support early learning activities throughout the county.
- The Kit for New Parents was distributed in Napa County in early 2002.
   Distribution occurred primarily through prenatal providers, Kaiser Permanante
   Medical Center, Healthy Moms and Babies, pediatric offices, and several county

health and human service departments.

- The Parenting Connection, a subcommittee of the Coalition of Non Profit
  Agencies, collects and distributes information regarding services and support
  for children and families. The Parent Connection: (1) developed and updated
  the Parenting Connection website; (2) provided staff support for meetings; and
  (3) produced a bookmark in English and Spanish that promotes the website. The
  project has leveraged Commission support for additional funds from the
  Community Foundation of the Napa Valley.
- The Commission is actively reaching out to the Latino community in order to identify ways to improve access to services. For example, funding for family resource centers to provide additional services and supports and to gather information about ongoing family needs.

#### **Innovative and Promising Practices**

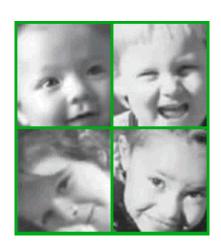
In the Commission's annual report to the State Commission, the following projects were identified as innovative and promising practices.

Sister Ann's Dental Clinic services greatly increased the number of children ages 0-5 receiving dental treatment. In 2002, 1,401 children in Napa County received treatment from the clinic. The project brings hospital dental services to Napa County where: (1) families previously were referred to a dentist in Sacramento or Davis; and, (2) a lack of transportation caused many families to delay or forego treatment. The Commission also funded the clinic for a prenatal and infant dental care program, which provides regular check ups to pregnant women and babies.

The **Therapeutic Childcare Center** provides preventative mental health services for children and families in a childcare context. Within a specially designed childcare environment, children with high bio-psycho-social risk factors and their families receive services from specialists in child development, special education,

childcare, psychology, psychiatry, public health nursing and social work. The Center received a 2002 CSAC Award for Excellence and Innovation in County Based Programs.

The **Touchpoints** training grant trained a number of early care professionals in an empathic relational service model. The Touchpoints model, developed by Dr. T. Berry Brazelton and his colleagues, results in improved child health and development and improved family functioning. Providers throughout the County have become increasingly competent in using the model through their increased knowledge of child and family development.



#### **Our Vision**

All Napa County children will reach age five physically and emotionally healthy, learning and ready to achieve their greatest potential in school.

#### **Our Mission**

Provide resources to support a comprehensive system of services that ensures children 0-5 of Napa County will enter school healthy and ready to learn.

# **Our Principles**

The following principles are intended to guide all Napa First 5 activities and responsibilities:

- I. Support families as children's primary caregivers and first teachers.
- II. Ensure that Napa County children of families from all cultural and linguistic diversity, including those with disabilities and special needs, can connect to a system of services that is easy to access, use and understand.
- III. Promote policies and system changes that support the healthy development and school readiness of all Napa County children.
- IV. Incorporate the highest quality standards for funded programs and focus on outcomes, using results-based accountability.
- V. Promote collaboration and partnerships across all family support systems to enhance access to needed services by Napa County families.



### **Community Planning Process**

#### The Initial Community Plan (2000)

In developing the initial plan, the Commission used several approaches to collecting information from the community. First, an innovative planning conference (Future Search) was used to support community representatives in creating a desired future and common vision for Napa County's children and families. The Commission also developed and distributed a survey concerning the most pressing issues faced by Napa County families and the kinds of support that would benefit them the most. Finally, all relevant Napa County planning documents were reviewed for information regarding trends in service needs.

#### Revising the Plan (2001-2003)

In revising the initial plan for 2001, the Community Plan Subcommittee supported a community forum, and a survey of families and family support agencies to identify ways to improve health and school readiness for Napa County children 0-5. In 2002, the Subcommittee developed and implemented a plan to gather information from Hispanic families throughout the county. Through formal and informal methods, families were asked about the support needs of their children as well as ideas that would help children get ready for successful learning experiences in school. In 2003, the Subcommittee continued its outreach efforts and reformatted the plan for easier use by the community and potential grant applicants.



#### **Goals and Indicators**

#### **Our Goals**

Using the principles previously stated, the Commission is actively working to achieve the following goals<sup>1</sup> for children 0-5 and families in Napa County:

- 1. Increase the quality of and access to early learning and education.
- 2. Promote the prevention, early identification of and intervention in health and development issues.
- 3. Provide information and tools to parents, families, and communities on the importance of early learning experiences.

In addition, the Commission actively supports countywide efforts that lead to the decrease in use of tobacco products by pregnant women, parents and caregivers of young children.

#### Statewide Indicators

The Commission has approved the following set of indicators for the above three goals. Increases [or, in some instances, decreases] in these indicators will reflect a healthier community for children and families. Countywide data on these indicators will be provided by the State Commission on a regular basis starting in the summer or fall of 2003.

Once a baseline is documented, the Commission will establish an annual *report card* summary<sup>2</sup> of subsequent data. In addition, it will continue to strongly encourage applications for funding that support and positively affects these indicators:

<sup>2</sup> **Note**: The summary will include specific definitions of each indicator as well as the data source.

<sup>&</sup>lt;sup>1</sup> These goals are aligned with the goals First Five California as of 4/30/03.

#### Early Childhood Learning and Education

- Number and percentage of families who report reading or telling stories regularly to their children, 3 to 5 years of age
- Number of licensed center child-care spaces per 100 children
- Number of licensed family child-care slots per 100 children
- Number of Head Start slots per 100 low-income children
- Number and percentage of licensed center child-care spaces for children with disabilities and other special needs

#### Early Childhood Health

- Number and percentage of children identified as having disabilities and other special needs [including a developmental delay] by the time of kindergarten entry
- Number and percentage of children living in poverty
- Infant survival rate
- Number and percentage of births at low birth weight
- Number and percentage of live births in which mothers received adequate prenatal care
- Number of Children receiving preventive and ongoing regular health care
- Number and percentage of women who are breastfeeding
- Number and percentage of children 0 to 5 years of age who are in the expected range of weight for their height and age
- Number and percentage of children aged 19-35 months who receive the recommended vaccines
- Number and rate of births to young teenage mothers

#### Parent and Community Education

- Number and percentage of children under age 5 who have lived in foster care within the past year
- Number and percentage of children under age 5 in foster care who are placed in a permanent home
- Number and percentage of children with substantiated or confirmed (open)
   cases of child abuse
- Number and percentage of child maltreatment in which there is a recurrence within a 6-month period
- Number and rate of emergency room visits by children with nonfatal unintentional injuries
- Number and percentage of children who have health insurance
- Number and percentage of children with a regular medical home (health care provider)
- Number and percentage of children who have dental insurance



#### **Current Service Needs**

#### Introduction

This section of the plan is devoted to a summary of major service needs for Napa County's children and families. It is by no means exhaustive, but provides an overview of potential service development.

#### **Current Service Needs by Goal Area**

Community input and relevant planning documents indicate the following service needs in the Commission's three goal areas.

Provide information and tools to parents, families, and communities on the importance of early learning experiences. In order to support a healthy community for Napa County's children and families, we need:

- Training for parent educators, health care professionals and community workshops on infant brain development research and its relationship to parenting.
- Additional family resource centers throughout the county.
- More bilingual and bicultural professionals.
- A media campaign to inform parents about infant brain development research and its relationship to parenting.
- Tobacco prevention programs such as peri-natal outreach and education, smoking cessation counseling for pregnant women, relapse prevention services, and cessation counseling for mothers in the hospital after delivery.
- Increased availability of health and parenting education at the high school level.
- Ongoing public education about family stressors and patterns that may lead to domestic violence.

Examples of services and supports funded by the Commission include: strength-based, family-centered training series for professionals and parents; expanded access to services to the Latino community through interpreters and translation of educational materials; a training institute for infant/parent mental health specialists; expansion of family resource center services; expansion of a counseling program for pregnant and parenting teens; abuse intervention services and training for volunteers; and, expansion of tobacco cessation programs.

**Promote the prevention, early identification of and intervention in health and development issues.** In order to support a healthy community for Napa County's children and families, we need:

- Increased availability of home visits to all families of newborns.
- More health care professionals trained in strength-based relational models of health care practices.
- Additional primary care physicians throughout the County.
- Affordable health insurance and access to healthcare linkages for uninsured families.
- Increased use of prenatal care resources in the first trimester of pregnancy.
- Increased availability of bilingual health care services and resource information.
- Expanded support and treatment services for parents and children in abusive situations.
- Assessment and support services for post partum depression.
- Additional psychiatrists, psychologists, social workers, and family and child therapists trained in the developmental and psychiatric assessment and treatment of children.
- Training for primary care physicians in the identification of developmental and psychiatric concerns in young children as well as available local resources.
- Residential treatment programs for women (that allow mothers and children to live together).

- Ongoing efforts to recruit and train additional community advocates for children and their families as they enter the justice system.
- Initiatives to address children's needs in the areas of oral health, nutrition, obesity and immunizations.

Examples of services and supports funded by the Commission include: community health outreach workers and part-time family nurse practitioners; children's dental treatment programs; family healthcare liaisons for families with special needs; perinatal dental care program; peri-natal education program; training, consultation and supports for parents and professionals in child development; and, therapeutic and supervised visitation for parents referred by the court.

*Increase the quality of and access to early learning and education*. In order to support a healthy community for Napa County's children and families, we need:

- Additional early education resources in North County, outlying rural areas, and in some neighborhoods of Napa.
- · Funding for additional early education subsidies.
- Public and private funding for subsidies of early education for children of all families.
- A collaborative media plan to promote the value of quality early education.
- Additional, trained, and retained personnel to provide early education services.
- Accessible and affordable pre and in-service training for early educators.
- Information for local employers regarding the benefits of supporting early education.
- Training, support and resource materials for early educators who are working with children who have behavioral challenges.
- Opportunities for joint training and collaboration between all early educators.
- Resources that support the early contact and assessment (as needed) of children entering kindergarten.

- Training for early education professionals on infant brain development research.
- Training and support such as case consultation, clinical support, cross training, and specialist support to facilitate the successful integration of children with special needs into typical child care and preschools.

Examples of services and supports funded by the Commission include: the expansion of an early literacy program; staff support for a therapeutic child care center; training and job development for early childhood careers; expansion of full day/full year preschool services; summertime, kindergarten transition programs; child care inclusion program; and, an emergency childcare assistance program.

## **Final Thoughts**

The Community Plan helps shape the policies and practices of the Commission. One of its major uses is to provide the Commission with guidance regarding its community investments. The underlying principles of those investments on behalf of Napa County's children and families are as follows:

- ➤ Collaborative efforts gain the greatest return on investment. That is, the development of new or expanded services for children and families must be the result of collaboration between agencies, organizations, and community stakeholders.
- Investments that **leverage additional resources** (e.g., in-kind funds, grants, philanthropy) serve to broaden the funding base for services and supports.
- Funding decisions must result in a balanced, community investment portfolio, for example:
  - Some investments will bring **short-term** (1 year) and others **long-term** (3-5 years) improvements in services and outcomes for children and families.
  - Development of new and expansion of current services should be considered in both public and private sector agencies and organizations.
  - **Investment in prevention** is critical and often overlooked when intervention needs are significant and urgent.
  - An investment in the **training of** *best practices* for professionals is as important as the direct services they provide.

We invite your participation as parents, professionals, and interested community members in making this investment in our children, our future.

